



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9537

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER 09/831,824 | FILING DATE 09/27/2001 RULE | CLASS 370 | GROUP ART UNIT 2664 | ATTORNEY DOCKET NO. 027566-030 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|

APPLICANTS

Leslie Graf, Victoria, AUSTRALIA;

 Ian Rytina, Victoria, AUSTRALIA;
 Christian Groves, Victoria, AUSTRALIA;

 ** CONTINUING DATA ***** *yes BQN 3/31/05*

This application is a 371 of PCT/EP99/08783 11/15/1999

 ** FOREIGN APPLICATIONS ***** *yes BQN 3/31/05*
 FINLAND 982472 11/16/1998

| | | | | | |
|---|---|----------------------------------|------------------------|----------------------|----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY AUSTRALIA | SHEETS DRAWING 1 | TOTAL CLAIMS 5 | INDEPENDENT CLAIMS 2 |
| Verified and Acknowledged | Examiner's Signature <i>[Signature]</i> Initials <i>BQN</i> | | | | |

 ADDRESS
 27045
 ERICSSON INC.
 6300 LEGACY DRIVE
 M/S EVR C11
 PLANO , TX
 75024

 TITLE
 Signalling in a telecommunications system

| | | |
|-----------------------------------|---|--|
| FILING FEE RECEIVED 990 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
| | | <input type="checkbox"/> 1.16 Fees (Filing) |
| | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| | | <input type="checkbox"/> 1.18 Fees (Issue) |
| | | <input type="checkbox"/> Other _____ |
| | | <input type="checkbox"/> Credit |